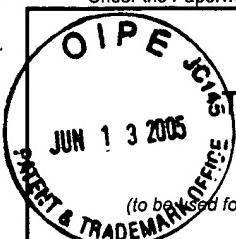


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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

 TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number 09/543,054
		Filing Date 4/5/2000
		First Named Inventor Gopal Parupudi
		Group Art Unit 2153
		Examiner Name YASIN M BARQADLE
Total Number of Pages in This Submission 1		Attorney Docket Number MS1-507US

ENCLOSURES (check all that apply)

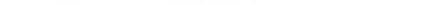
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>): PTO Form 1449; 13 cited references; return postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Documents	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts ✓ under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Lance R. Sadler, Reg. No. 38605
Signature	
Date	8/10/10

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Carly Taylor
Signature	
	Date 6/10/05

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

2 Serial No. 09/543,054
Filing Date 4/5/2000
3 Confirmation No. 7234
Inventorship Gopal Parupudi
4 Applicant Microsoft Corporation
Group Art Unit 2153
5 Examiner YASIN M BARQADLE
Attorney's Docket No. MS1-507US
6 Title: Context Aware Computing Devices and Methods
7

8 **INFORMATION DISCLOSURE STATEMENT**

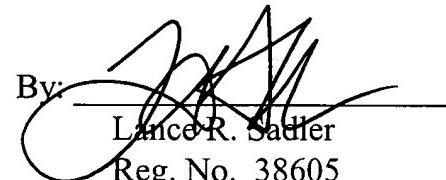
9 *References -- See Attached Form PTO-1449*

10 **REMARKS**

11 The citations listed, copies attached, are submitted in compliance with the
12 duty of disclosure defined in 37 CFR §1.56. The Examiner is requested to make
13 these citations of official record in this application.

14
15 Respectfully Submitted,

16 Date: 6/10/05

17 By: 
Lance R. Sadler
Reg. No. 38605

18
19 06/14/2005 HTECK2001 00000015 120769 09543054
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21 01 FC:1806 180.00 DA
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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180.00

Complete if Known

Application Number	09/543,054
Filing Date	4/5/2000
First Named Inventor	Gopal Parupudi
Examiner Name	YASIN M BARQADLE
Art Unit	2153
Attorney Docket No.	MS1 507US

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

<u>Fee (\$)</u>	<u>Small Entity</u>
50	25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200	100
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Multiple dependent claims

360	180
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<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 or HP =	x 50	=				

HP = highest number of total claims paid for, if greater than 20

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 3 or HP =	x 200	=	

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: IDS

Fees Paid (\$)

180.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	38605	Telephone (509) 324-9256
Name (Print/Type)	Lance R. Sadler	Date	6/1/05	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Substitute for form 1449/PTO

Complete if Known**INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Sheet 1 of 1

Application Number	09/543,054
Filing Date	4/5/2000
First Named Inventor	Gopal Parupudi
Art Unit	2153
Examiner Name	YASIN M BARQADLE
Attorney Docket Number	MS1 507US

U. S. PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Document Number <small>Number-Kind Code² (if known)</small>	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		US- 5937164	8/10/1999	Mages et al.	
		US- 6031545	2/29/2000	Ellenby et al.	
		US- 6088717	7/11/2000	Reed et al.	
		US- 6091956	7/18/2000	Hollenberg	
		US- 6104980	8/15/2000	Sato et al.	
		US- 6359892	3/19/2002	Szlam	
		US- 6411899	6/25/2002	Dussell et al.	
		US- 6421716	7/16/2002	Eldridge et al.	
		US- 6336138	1/1/2002	Caswell et al.	
		US- 6182136	1/30/2001	Ramanathan et al.	
		US- 20020083025	6/27/2002	Robarts et al.	
		US-			

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document <small>Country Code³-Number⁴-Kind Code⁵ (if known)</small>	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁶
		WO 97/41654	11/6/1997	Telefonaktiebol		
		WP 00/70504	11/23/2000	Herz, Frederick		

Examiner Signature	Date Considered
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

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